U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

PEAD THE INSTRUCTIONS C	AREFULLY BEFORE PREPARING THIS REPORT.
E QUESOS E	
1. File Number U -	2. Fiscal Year Covered From:
12899	1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.	Name, file number, and address of labor organization.
Name CLAY WALKER	Name NFL PLAYERS ASSOCIATION
	Labor Organization File Number 5 19013
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 10405 JoiNERS LN.	Street 2021 L ST., NW
City POTOMAC	City WASHINGTON
State MD ZIP Code + 4 2085	54 State DC ZIP Code +4 20036
	your spouse or minor child directly or indirectly had any of the following interests the exclusions set forth in the instructions):  with, or derived income or other economic benefit of ganization represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any)?	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	7.b. Amount.
Street	
City	
State ZIP Code + 4	
	Signature
	penalty of Perjury and other applicable penalties of the law, that all of the information coompanying documents), has been examined by the signatory and is, to the best of the section on penalties in the instructions.)
Signed Cla, William	On 6/21/05 202-496-2871
· ·	Date Telephone Number

NFL

	Name of Person Filing CLAY, WALKEN		File Number U-
	B. Held an interest in or derived income or economic benefit with monetary value substantial part of which consists of buying from, selling or leasing to, or otherworf an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	vise dealing with the business rely seeking to represent, or irectly to, or otherwise	s
<i>U</i>	8. Name and address of Business (including trade name, if any).  Name   Rechok   Trade Name, if any:    P.O. Box, Bidg., Room No., if any    Street   1895   T. W. Fosker Blvd.  City   Canton    State   MA   ZIP Code +4   O2021	9. Business deals with:  a. Labor Organiza  b. Trust  c. Employer	ation
	10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZiP Code + 4	11.a. Nature of such deali    Phir 27 12  Our business  11.b. Approximate dollar value  12.a. Nature of interest hele	Ceebok shoes. Part of deal with Recboke  we of such dealing. \$75.00
		12.b. Amount.	
	C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4		
		<del> </del>	

or Consultant

13.b. Is the Business an Employer

Name of Person Filing CLAY WALKER	File Number U-
B. Held an interest in or derived income or economic benefit with monetary vasubstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is act (2) any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	rwise dealing with the business ively seeking to represent, or directly to, or otherwise
8. Name and address of Business (including trade name, if any).  Name Recbok  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street /895 J.W Fosker Blud.  City Canfor  State MA ZIP Code +4 02czi	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City	11.a. Nature of such dealing.  Gift bas at 2004 Pro Bowl. Bag  was given to all Pro Bowl players  and working Straff at the Pro Bow!  11.b. Approximate dollar value of such dealing.  \$ 150.00
State ZiP Code + 4	12.a. Nature of interest held or income received.  12.b. Amount.
C. Received from any employer (other than an employer covered und	ter parts A and B above)
or from any labor relations consultant to an employer any payment of mone  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:	14.a. Nature of payment.
P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	

14.b. Amount of payment.

or Consultant

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13.b. is the Business an Employer

Name of Person Filing CLAT) with Kern	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or otherword an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	rise dealing with the business ety seeking to represent, or rectly to, or otherwise	
8. Name and address of Business (including trade name, if any).  Name Electronic Arts  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 209 Redwood Shores Pay kwey  City Redwood City  State CA ZIP Code +4 99065	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	11.a. Nature of such dealing.  Business Dinner. Dinner of Gunnal melbing at EH business ferms of our part  11.b. Approximate dollar value of such dealing.  12.a. Nature of Interest held or income received.	to diseass
	12.b. Amount	
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money		
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name		!
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4		
State ZIP Code + 4	14.b. Amount of payment.	
13.b. Is the Business an Employer or Consultant?	l Paymana	

Name of Person Filing CLA, WALKER	File Number U-
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or included the property of the dealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business: vely seeking to represent, or directly to, or otherwise
8. Name and address of Business (including trade name, if any).  Name Upper Deck Company  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 5409 Sea OHer Place  City Carlsbed  State CA ZIP Code +4 92003	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	11.a. Nature of such dealing.  Business dinner after annual meeting to discuss business terms of our licensing pertrusship.  11.b. Approximate dollar value of such dealing.  12.a. Nature of interest held or income received.
	12.b. Amount.
C. Received from any employer (other than an employer covered undor from any labor relations consultant to an employer any payment of money	er parts A and B above) y or other thing of value.
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bidg., Room No., if any  Street  City  State  ZIP Code + 4	14.a. Nature of payment.
13 h is the Business an Employer or Consultant 2	14.b. Amount of payment.

Name of Person Filing CLAy WHIKE	File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any).  Name TOPPS Trading Cand Company  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street One Whitchall St.  City New York  State Ny ZIP Code +4 10004	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer		
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:  P.O. Box, Bidg., Room No., if any  Street  City  State  ZIP Code + 4	11.a. Nature of such dealing.  Business Dinner After annual trading card convention. Discussed business terms of our lizensing partnership.  11.b. Approximate dollar value of such dealing.  12.a. Nature of interest held or income received.		
	12.b. Amount.		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	14.a. Nature of payment.		
13.b. is the Business an Employer or Consultant?	14.0. Amount or payment.		

Name of Person Filling CLAY, WALKER	File Number U-
B. Held an interest in or derived income or economic benefit with monetary valubstantial part of which consists of buying from, setting or leasing to, or otherwif an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise
Name and address of Business (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer
0. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	11.b. Approximate dollar value of such dealing.  12.a. Nature of interest held or income received.
C. Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of money	
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Trade Name, if any:	Business Curch to discuss our annual livensing andits
P.O. Box, Bidg., Room No., if any	

Name of Person Filling CLAY, WALKER	File Number U-		
3. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employee whose employees your labor organization represents or is actively seeking to represent, or 2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
3. Name and address of Business (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  ZIP Code + 4	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name Trade Name, if any:  P.O. Box, Bldg., Room No., if any			
Street	11.b. Approximate dollar value of such dealing.		
City	12.a. Nature of interest held or income received.		
State ZIP Code + 4			
	12.b. Amount.		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name Calibre CPA Group	pusiness Lunch Wiscussed Auguros		
Trade Name, if any:	Business Lunch Discussed Frances at the NFIPM's annual bound meeting		
P.O. Box, Bldg., Room No., if any Street			
City Washizefor			
State ZIP Code + 4 Zoo 6			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.		

Name of Person Filing CLAY WAZKEN	File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
Name and address of Business (including trade name, if any).	9. Business deals with:		
Name			
Trade Name, if any:	a. Labor Organization b. Trust		
P.O. Box, Bldg., Room No., if any	tournel		
Street	c. Employer		
City			
State ZIP Code + 4			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street	[ [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [		
City	11.b. Approximate dollar value of such dealing.  12.a. Nature of interest held or income received.		
State ZIP Code + 4			
	12.b. Amount		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.		
(including trade name, if any).	Business Dinner Discussed		
Name Calibre CPH Group	Business Dinner Discussed.  Finances of Board weeky		
Trade Name, if any:	munity		
P.O. Box, Bldg., Room No., if any			
Sueet Sueet			
State ZIP Code + 4 20006			
Color Established Color			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.		

Name of Person Filing CCAY WITKEN	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name		
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street	c. Employer	
City		
State ZIP Code + 4		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City	11.b. Approximate dollar value of such dealing.  12.a. Nature of interest held or income received.	
State ZIP Code + 4	The state of the s	
	12.b. Amount.	
C. Received from any employer (other than an employer covered un or from any labor relations consultant to an employer any payment of mon	der parts A and B above) ey or other thing of value.	
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.	
(including trade name, if any).	Business Lunch. Follow up	
Name Calibre (MA Group	discussion on organization's	
Trade Name, if any:	Business Lunch. Follow up discussion on organization's annual licensing andits	
P.O. Box, Bldg., Room No., if any		
Street 1450 E St., NW		
City Washington		
State DC ZIP Code + 4 Z000 6		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	